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**Healey Surgery**

**Complaints Policy**

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| --- | --- |
| **Position** | **Named individual** |
| Complaints Lead | Dr Azm Khan |
| Complaints Manager | Toni Wilson |
| Senior Partner | Dr Ayman Ramadan |

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# Introduction

## Policy statement

The purpose of this document is to ensure all staff understand that all patients have a right to have their complaint acknowledged and investigated properly. Healey Surgery takes complaints seriously and ensures that they are investigated in an unbiased, transparent, non-judgemental and timely manner. The Surgery will maintain communication with the complainant (or their representative) throughout, ensuring they know their complaint is being taken seriously.

In accordance with the [Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Regulation 16)](https://www.legislation.gov.uk/ukdsi/2014/9780111117613/regulation/16), The Local Authority Social Services and National Health Service complaints ( England) regulations 2009. All staff at Healey Surgery must fully understand the complaints process. Supporting information including legislative requirements and additional reading on complaints management can be found at [Annex A](#_Annex_A_–).

## Status

In accordance with the [Equality Act 2010](https://www.legislation.gov.uk/ukpga/2010/15/contents), we have considered how provisions within this policy might impact on different groups and individuals. This document and any procedures contained within it are non-contractual, which means they may be modified or withdrawn at any time. They apply to all employees and contractors working for the organisation.

# Requirements

## Complaints management team

The Surgery has a responsible person for complaints who is known as the Complaints Lead, Dr Azm Khan. Dr Khan is responsible for maintaining both legislative and regulatory requirements. This role is supported by the Complaints Manager, Toni Wilson, who is responsible for the day-to-day management of any complaint that may be received.

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## Definition of a complaint versus a concern

NHS England defines that a concern is something that a service user is worried or nervous about and this can be resolved at the time the concern is raised or by no later than the end of the next working day, whereas a complaint is a statement about something that is wrong or that the service user is dissatisfied with, which requires a response. Should a service user be concerned and raise this as such, if they believe that it has not been dealt with satisfactorily, then they may make a complaint about that concern. A concern may also be called a criticism.

## Formal or informal?

There is no difference between a ‘formal’ and an ‘informal’ complaint; both are an expression of dissatisfaction. Unless the complainant specifically requests that their issue needs to be raised as a complaint, the Complaints Manager will consider whether it is logged as either a concern or complaint should they believe that it can be resolved quickly. [CQC GP mythbuster 103: Complaints management](https://www.cqc.org.uk/guidance-providers/gps/gp-mythbusters/gp-mythbuster-103-complaints-management) states that a verbal complaint or concern does not need to be logged if resolved by the end of the next working day.

## Complaints information

Healey Surgery has prominently displayed notices within the practice detailing the complaints process, and this information is also on the Surgeries website. A complaints leaflet is also available at reception [Annex B](#_Annex_F_–).

Any person making a complainant should be provided with a copy of the complaints leaflet as this details the process, who to address the complaint to, advocacy support information and how to escalate their complaint if they are not content with the findings or outcome.

## Duty of candour

The duty of candour is a general duty to be open and transparent with people receiving care at Healey Surgery. Both the statutory duty of candour and professional duty of candour have similar aims, to make sure that those providing care are open and transparent with the people using their services whether something has gone wrong or not.

For further detailed information, see the organisation’s Duty of Candour Policy and [CQC GP mythbuster 32: Duty of Candour and General Practice (regulation 20)](https://www.cqc.org.uk/guidance-providers/gps/gp-mythbusters/gp-mythbuster-32-duty-candour-general-practice-regulation-20).

## Parliamentary and Health Service Ombudsman (PHSO)

The role of the [PHSO](https://www.ombudsman.org.uk/) is to make final decisions on complaints that have not been resolved locally by either the organisation or the Integrated Care Board (ICB). The PHSO will look at complaints when someone believes there has been an injustice or hardship because an NHS provider has not acted properly or has given a poor service and not put things right.

The PHSO can recommend that organisations provide explanations, apologies and financial remedies to service users and that they take action to improve services.

## Complainant options

The complainant, or their representative, can complain about any aspect of care or treatment they have received at Healey Surgery to either:

**Stage 1**

* The Practice, or,
* Directly to the local [ICB](https://www.nhs.uk/nhs-services/find-your-local-integrated-care-board/) (details on how you can do this are on the patient complaint form)

While there is no requirement for a complaint to be sent to ICB, a complaint may still be received by ICB directly. In this instance, the BMA provides guidance in its [Dealing with complaints made against you as a GP practice](https://www.bma.org.uk/advice-and-support/gp-practices/complaints-in-primary-care/complaints-in-primary-care) document.

**Stage 2**

Should the complainant be dissatisfied with the response from either the ICB or the organisation then the next steps are to:

* Escalate the complaint to the PHSO. This process is as detailed within the [Local Authority Social Services and National Health Service Complaints (England) Regulations (2009)](https://www.legislation.gov.uk/uksi/2009/309/contents/made) with outlining information being found within the complaints leaflet

Specific details of how to complain to the local ICB can be found on its webpage.

## Timescale for making a complaint

The time constraint for bringing a complaint is 12 months from the occurrence giving rise to the complaint or 12 months from the time that the complainant becomes aware of the matter about which they wish to complain. If, however, there are good reasons for a complaint not being made within the timescale detailed above, consideration may be afforded to investigating the complaint if it is still feasible to investigate the complaint effectively and fairly.

Should any doubt arise, further guidance can be sought from the ICB.

## Responding to a complaint

While each concern or complaint merits its own response, the outcome is always to ensure the best response is provided.

The following are the considered communication responses to any complaint:

* Should a patient be complaining in person, then this should be discussed face-to-face with them
* If via telephone, then it is acceptable to call back should the issue not be immediately resolved
* If by email/letter, then any response should be in writing

[CQC GP mythbuster 103 – Complaints management](https://www.cqc.org.uk/guidance-providers/gps/gp-mythbusters/gp-mythbuster-103-complaints-management) advises practices cannot insist complainants ‘put their complaints in writing’ and that the tone of a response needs to be professional, measured and sympathetic.

**Immediate response**

Should a patient, or the patient’s representative, wish to discuss a complaint or a concern, then this can be deemed to be a less formal approach. These are often simply a point to note or a concern and can be dealt with at this time.

Points to be considered should an immediate response be given:

* All facts need to be ascertained prior to any escalation to the Complaints Manager
* Should the person be or become angry, and if there is no risk of escalation, then suggest to the complainant that their concern is dealt with within a quiet space and away from other patients. When doing this, support from a colleague should be requested
* If needing to return the call to an angry patient, then by allowing time to elapse can often be useful as this delay may diffuse their anger. However, this should ordinarily be within the same day as any extended delay could be counterproductive and the situation could then become more inflamed
* Time management always needs to be considered

Consider any potential precedence that may be established, and if any future concern be expected to always be dealt with immediately should any response be given too soon.

**Longer term response**

This is normally when a more formal approach has been taken, although the concern or complaint could still be via a face-to-face discussion or telephone as it does not require to have been in writing to be considered.

When a concern or complaint cannot be easily resolved, then the complainant has a right to be regularly updated regarding the progress of their complaint. With any complaint, the Complaints Manager will provide an initial response as an acknowledgement within three working days after the complaint is received.

**Timescales**

The Complaints Manager will provide an initial acknowledgement of any complaint within three working days after the complaint is received. The acknowledgement must include the timescales for an expected response and offer to discuss the complaint if this has not already taken place, and details of the local advocacy service.

Following any complaint, a full investigation will be undertaken and while Healey Surgery can suggest a deadline for a response to be given, there is no obligation to do so.

Following this, we will endeavour to undertake investigations and respond to all complaints within 60 days. However, we acknowledge that in some circumstances, this timeframe may need to be extended.

Further detailed information is available in NHS Resolution’s [Responding to complaints](https://resolution.nhs.uk/wp-content/uploads/2019/03/CNSGP-Responding-to-complaints.pdf).

## Meeting with the complainant

To support the complaints process, [BMA guidance](https://www.bma.org.uk/advice-and-support/gp-practices/complaints-in-primary-care/complaints-in-primary-care) suggests a meeting should be arranged between the complainant and the complaints lead. While not a CQC requirement, having a meeting is considered as being best practice due to there often being a more positive outcome.

## Verbal complaints

If a patient wishes to complain verbally and they are content for the person dealing with them to handle the complaint (and if appropriate to do so), then complaints should be managed at this level. After this conversation, the patient may suggest that no further action is needed, then the matter can be deemed to be closed.

If the matter demands immediate attention, the Complaints Manager should be contacted who may offer the patient an appointment or may see the complainant at this stage. Staff are reminded that when internally escalating any complaint to the Complaints Manager, a full explanation of the events leading to the complaint is to be given to allow an appropriate response. Verbal complaints that are not resolved by the end of the next working day should be added to the Complaints Log and dealt with formally.

## Written complaints

When a written complaint is received, a full investigation and response will always be provided. As part of the investigation process, other clinical governance tools will be used to complete this action such as meetings, audit, significant event and training etc. Should the complaint not be upheld, Healey Surgery will scrutinise the event in the desire to improve patient outcomes.

## Who can make a complaint?

A complaint may be made by the person who is affected by the action, or it may be made by a person acting on behalf of a patient in any case where that person:

* Is a child (an individual who has not attained the age of 18)

In the case of a child, Healey Surgery must be satisfied that there are reasonable grounds for the complaint being made by a representative of the child and furthermore that the representative is making the complaint in the child’s best interests.

* Has died

In the case of a person who has died, the complainant must be the executor or personal representative of the deceased. Healey Surgery will require to be satisfied that the complainant is the executor or personal representative.

When appropriate, the organisation may request evidence to substantiate the complainant’s claim to have a right to the information.

* Has physical or mental incapacity

In the case of a person who is unable by reason of physical capacity or lacks capacity within the meaning of the [Mental Capacity Act 2005](https://www.legislation.gov.uk/ukpga/2005/9/contents) to make the complaint themselves, the organisation needs to be satisfied that the complaint is being made in the best interests of the person on whose behalf the complaint is made.

* Has given consent to a third party acting on their behalf

In the case of a third party pursuing a complaint on behalf of the person affected, the organisation will request the following information:

* + Name and address of the person making the complaint
  + Name and either date of birth or address of the affected person
  + Contact details of the affected person so that they can be contacted for confirmation that they consent to the third party acting on their behalf

The above information will be documented in the file pertaining to this complaint and confirmation will be issued to both the person making the complaint and the person affected.

* Has delegated authority to act on their behalf, for example in the form of a registered Power of Attorney which must cover health affairs
* Is an MP, acting on behalf of and by instruction from a constituent

Should the Complaints Manager believe a representative does or did not have sufficient interest in the person’s welfare, or is not acting in their best interests, they will discuss the matter with either medico-legal defence or [NHS Resolution](https://resolution.nhs.uk/) to confirm prior to notifying the complainant in writing of any decision.

## Complaints advocates

Details of how patients can complain and how to find independent NHS complaints advocates are detailed within the complaints leaflet at [Annex B](#_Annex_D_–). Additionally, the patient should be advised that the local Healthwatch can help to find an independent complaints advocacy service in the area. The PHSO provides several more advocates within its webpage titled [Getting advice and support](https://www.ombudsman.org.uk/making-complaint/getting-advice-and-support).

## Investigating complaints

Healey Surgery will ensure that complaints are investigated effectively and in accordance with extant legislation and guidance. Furthermore, it will adhere to the following standards when addressing complaints:

* The complainant has a single point of contact in the organisation and is placed at the centre of the process. The nature of their complaint and the outcome they are seeking are established at the outset
* The complaint undergoes initial assessment, and any necessary immediate action is taken. A lead investigator is identified
* Investigations are thorough, where appropriate obtain independent evidence and opinion, and are carried out in accordance with local procedures, national guidance and within legal frameworks
* The investigator reviews, organises and evaluates the investigative findings
* The judgement reached by the decision maker is transparent, reasonable and based on the evidence available
* The complaint documentation is accurate and complete. The investigation is formally recorded with the level of detail appropriate to the nature and seriousness of the complaint
* Both the complainant and those complained about are responded to adequately
* The investigation of the complaint is complete, impartial and fair
* The complainant should receive a full response or decision within 60 days following the initial complaint being made. If the complaint is still being investigated, then this would be deemed to be a reasonable explanation for a delay
* The response letter must include the contact details for the Parliamentary and Health Service Ombudsman.

## Conflicts of interest

During any response, staff should consider and declare if their ability to apply judgement or act as a clinical reviewer could be impaired or influenced by another interest that they may hold. This could include, but is not limited to, having a close association with or having trained or appraised the person(s) being complained about, and/or being in a financial arrangement with them previously or currently.

In such circumstances, the organisation must seek to appoint another member of staff as the responsible person with appropriate complaint management experience.

## Confidentiality in relation to complaints

Any complaint is investigated with the utmost confidentiality and all associated documentation will be held separately from the complainant’s medical records.

Complaint confidentiality will be maintained, ensuring only managers and staff who are involved in the investigation know the particulars of the complaint.

## Complaints citing legal action

If a complaint is received that states legal action has been sought, the responsible person will consider contacting the Surgery’s defence union for guidance on how best to manage the complaint.

Should any complainant cite legal action that refers to an incident after 1 April 2019, contact NHS Resolution and they will assist under the [Clinical Negligence Scheme for General Practice (CNSGP)](https://resolution.nhs.uk/services/claims-management/clinical-schemes/general-practice-indemnity/clinical-negligence-scheme-for-general-practice/). Refer to the NHS Resolution Guidance for general practice document [here](https://resolution.nhs.uk/wp-content/uploads/2019/03/CNSGP-Responding-to-complaints-1.pdf).

While detailed records will always be maintained following any complaint, it is of particular importance when a complaint cites legal action. This is to ensure that all information can be forwarded for medico-legal defence support as required.

## Multi-agency complaints

The [Local Authority Social Services and NHS Complaints (England) Regulations 2009](https://www.legislation.gov.uk/uksi/2009/309/regulation/9/made) state that organisations have a duty to co-operate in multi-agency complaints.

If a complaint is about more than one health or social care organisation, there should be a single co-ordinated response. Complaints Managers from each organisation will need to determine who the lead organisation will be, and they will then be responsible for co-ordinating the complaint, agreeing timescales with the complainant.

If a complaint becomes multi-agency, the organisation should seek the complainant’s consent to ask for a joint response. The final response should include this and, as with all complaints, any complaint can be made to the provider/commissioner but not both.

## Complaints involving external staff

If a complaint is received about a member of another organisation’s staff, then this is to be brought to the attention of their Complaints Manager as soon as possible. The Complaints Manager will then liaise with the other organisation’s manager.

## Complaints involving locum staff

Healey Surgery will ensure all locum staff are aware of the complaints process and that they will be expected to partake in any subsequent investigation, even if they have left the organisation. Locum staff will receive assurance that they will be treated equally, and the process will not differ between locum staff, salaried staff or partners.

## Additional governance requirements

When a complaint is raised, it may prompt other considerations, such as a significant event (SE), audit or identify training requirements. For further detailed information, see the organisation’s Governance Handbook and the Significant Event and Incident Policy.

The complainant, their carers and/or family can be involved in the SE process as this helps to demonstrate that the issue is being taken seriously.

To scrutinise any process, refer to the organisation’s Quality Improvement and Clinical Audit Policy.

Any remedial training considerations are supported within the organisation’s Training Handbook and Training Evaluation Form.

## Fitness to practise

If the complaint is of a clinical nature, the Senior Partner will be responsible for discussing this with any clinician cited in the complaint. Should the complaint merit a fitness to practise referral, advice is to be sought from the relevant governing body.

## Private practices and the PHSO

Independent doctors are unable to use the PHSO as they have no legal requirement to have an appeals mechanism. It is good practice to provide independent adjudication on any complaint by using a service such as [Independent Sector Complaints Adjudication Service](https://iscas.cedr.com/) (ISCAS).

## Logging and retaining complaints

Healey Surgery logs its complaints on the complaints tracker and retains information as per the practices Records Retention Policy. Evidence required includes:

1. Logging, updating and tracking for trends and considerations
2. Details of all dates of acknowledgement, holding and final response letters and the timely completion of all correspondence relating to the complaint
3. Compliance with the complaints in the categories that are required to complete the annual [KO14b submission](https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections/primary-care-gp-and-dental-complaints-collection-ko41b) to NHS Digital

This data is submitted to NHSE within the KO14b complaints report annually and then published by NHS Digital. Any reporting period covers the period from 1 April until 31 March. Evidence of complaints can be compiled within the organisation’s [KO14b Complaints Log Toolkit](https://practiceindex.co.uk/gp/forum/resources/ko14b-complaints-log-toolkit.1364/).

Complaints records must be kept by the practice for ten years.

# Use of complaints as part of the revalidation process

## Outlined processes

As part of the revalidation process, GPs must declare and reflect on any formal complaints about them in tandem with any complaints received outside of formal complaint procedures at their appraisal for revalidation. These complaints may provide useful learning.

The following information is to support the appraisal and revalidation process for various healthcare professionals:

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| GPs | [Royal College of General Practitioners (RCGP)](https://www.rcgp.org.uk/your-career/revalidation/appraisal-revalidation-support) |
| Nurses | [Nursing and Midwifery Council (NMC)](https://www.nmc.org.uk/revalidation/overview/what-is-revalidation/) |
| Pharmacists | [General Pharmaceutical Council (GPhC)](https://www.pharmacyregulation.org/pharmacists/revalidation-renewal) |
| Other healthcare professionals | [Healthcare Professions Council (HCPC)](https://www.hcpc-uk.org/globalassets/resources/reports/continuing-fitness-to-practise---towards-an-evidence-based-approach-to-revalidation.pdf?v=636785062220000000)  For Physician Associates, the [GMC](https://www.professionalstandards.org.uk/organisations-we-oversee/regulators/general-medical-council-gmc) became responsible for their regulation from December 2024 and is detailed within [The Anaesthesia Associates and Physician Associates Order 2024](https://www.legislation.gov.uk/uksi/2024/374/contents/made) |

# Annex A – Legislation and further reading

The following links support complaints management:

* [The Data Protection Act 2018](https://www.legislation.gov.uk/ukpga/2018/12/contents/enacted)
* [Public Interest Disclosure Act 1998](https://www.legislation.gov.uk/ukpga/1998/23/contents)
* [The NHS Constitution](https://www.gov.uk/government/publications/the-nhs-constitution-for-england)
* [PHSO - Principles of Good Complaint Handling](https://www.ombudsman.org.uk/sites/default/files/page/0188-Principles-of-Good-Complaint-Handling-bookletweb.pdf)
* [PHSO - NHS Complaint Standards](https://www.ombudsman.org.uk/organisations-we-investigate/nhs-complaint-standards)
* [PHSO – An opportunity to improve](https://www.ombudsman.org.uk/publications/opportunity-improve)
* [Good Practice standards for NHS Complaints Handling](https://www.noeccn.org.uk/resources/Documents/Education%20Group/Resources/Good-Practice-standards-for-NHS-Complaints-HandlingSept-2013.pdf)
* [General Medical Council (GMC) ethical guidance](https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/good-medical-practice)
* [Assurance of Good Complaints Handling for Primary Care – A toolkit for commissioners](https://www.england.nhs.uk/publication/assurance-of-good-complaints-handling-for-primary-care-a-toolkit-for-commissioners/)

# Annex B – Complaint leaflet

A patient information leaflet regarding complaints is shown overleaf

* Make sure you receive an apology, where this is appropriate
* Identify ways to prevent an issue for re occurring.

**ADVOCACY SUPPORT**

If you need help understanding your care or feel unable to speak up for yourself, an advocate can support you. If you would an advocate to support, you with your complaint please contact: the **Advocacy Together Hub Rochdale** on 01706 641389 or

Email [rochdaleadvocacy@together-uk.org](mailto:rochdaleadvocacy@together-uk.org)

**ALTERNATIVE OPTIONS**

Alternatively, you can make a complaint to the Local **Integrated Care Board** (ICB) if you feel you are unable to raise your complaint direct to the Surgery.

You can contact the ICB by email [nhsgm.patientservices@nhs.net](mailto:nhsgm.patientservices@nhs.net), by phone 0161 271 3980 (9am-4pm Monday-Friday), or by post - NHS Greater Manchester, The Tootal Buildings, 56 Oxford St, Manchester M1 6EU. For further information please visit their website on - <https://gmintegratedcare.org.uk/patient-services>

**ESCALATING A COMPLAINT**

An **independent** review may be sought from the Parliamentary and Health Service Ombudsman if you remain dissatisfied with the practice’s response. You can contact Ombudsman on 0345 015 4033 or write to Parliamentary and Health Service Ombudsman, Millbank Tower, Millbank, London SW1P 4QP

**HOW TO RAISE A COMPLAINT**

In the first instance please speak directly with the staff member involved. Where the issue cannot be resolved at this stage, please contact the **Complaints Manager** Toni Wilson who will try to address the issue and offer you further and support. If the complaints manager is not available, she will endeavour to contact at her earliest opportunity.

If your issue remains unresolved and you wish to make a formal complaint, please let us know as soon as possible. This helps us to investigate fully and fairly.

You should raise a complaint:

* Within 12 months of the incident that caused the problem

**OR**

* Within 12 months from when the complaint comes to your notice

Complaints can be made verbally or in writing.

**WHAT HAPPENS NEXT?**

The Practice will acknowledge your complaint within three working days.

We will ask how you would prefer to be contacted dure in the process.

The practice aims to respond fully within 60 days, though in some cases it could potentially take longer, in these instances we will keep you informed.

When the practice investigates your complaint, it aims to:

* Ascertain the full circumstances of the complaint.

**LET HEALEY SURGERY KNOW YOUR VIEWS**

Healey Surgery is committed to continually improving the services it provides to patients. To do this effectively, we value your feedback on the care and services you receive. Please let us know what we are doing well, where we may not be meeting your expectations, and any ideas or suggestions you may have. By listening to you, we can continue to develop and enhance the services we offer.

**TELL US ABOUT OUR SERVICE BY COMPLETING THE COMMENTS FORM IN THIS LEAFLET**

* Could you easily get through on the phone?
* Did you get an appointment with the practitioner you wanted to see?
* Were you seen within 20 minutes of your scheduled appointment time?
* Were our staff helpful and courteous?

**PRACTICE COMPLAINTS PROCEDURE**

If you have a complaint about any aspect of the service you have received, please let us know. Healey Surgery operates a formal Complaints Procedure in line with NHS guidelines.

Please be assured: making a complaint will not affect your care, treatment or support, and you will not be discriminated against in any way.

**COMPLIMENTS/COMPLAINTS AND COMMENTS FORM**

Name: …………………………………………………………

Address: ………………………………………………………………………………………………………………………………………………………….

Telephone: ………………………………………………………………………………………………………………………………………………………

Date of complaint/compliment/ comment: …………………

Details:……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

Signed: ……………………………………………….

# Annex C – Complaint handling desktop aide-memoire

**\*** It may be necessary to liaise with external third parties such as hospitals to gather additional information or to formulate a joint response. Where this is the case, the patient or their representative must be advised accordingly.

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